Application Data Sheet

Application Information

Application Type:: Regular Subject Matter:: Utility Suggested Classification:: Suggested Group Art Unit:: CD-ROM or CD-R?:: None Number of CD disks:: 000 Number of copies of CDs:: ÓO Sequence submission?:: Paper Computer Readable Form (CRF)?:: Yes. Number of copies of CRF:: 01 Title:: ISOLATED HUMAN TRANSPORTER PROTEINS, NUCLEIC ACID MOLECULES ENCODING HUMAN. TRANSPORTER PROTEINS, AND USES THEREOF Attorney Docket Number:: CL001103CON Request for Early Publication?:: No Request for Non-Publication?:: No Suggested Drawing Figure:: 1A 52 Total Drawing Sheets:: Small Entity:: No Petition included?:: No Petition Type:: Licensed US Gov't Agency:: . Contract or Grant Numbers:: Secrecy Order in Parent Appl.?::

Applicant Information

of mailing address:

Inventor Applicant Authority type:: Primary Citizenship Country: Status:: Full Capacity Given Name:: Gennady Middle Name:: Family Name:: MERKULOV City of Residence::: Baltimore State or Province of Residence:: MD Country of Residence:: US. Street of mailing address:: c/o Celera Genomics. 45 West Gude Drive Rockville City of mailing address:: State or Province of mailing address: MD Postal or Zip Code

20850

Applicant Authority type:: Inventor Primary Citizenship Country: US Status:: Full Capacity Given Name:: Middle Name::--Family Name:: YE City of Residence:: Boyds State or Province of Residence:: MD Country of Residence:: US Street of mailing address:: c/o Celera Genomics 45 West Gude Drive City of mailing address:: Rockville State or Province of mailing address: MD Postal or Zip Code of mailing address: 20850 Applicant Authority type:: Inventor Primary Citizenship Country: Status:: Full Capacity Given Name:: Karen Middle Name:: Family Name:: KETCHUM City of Residence:: Germantown State or Province of Residence:: MD Country of Residence:: Street of mailing address:: c/o Celera Genomics 45 West Gude Drive City of mailing address:: Rockville State or Province of mailing address: MD Postal or Zip Code 20850 of mailing address: Applicant Authority type:: Inventor Primary Citizenship Country: IT Status:: Full Capacity Given Name:: Valentina

Middle Name:: Family Name::

City of Residence::

State or Province of mailing address: Postal or Zip Code of mailing address:

Country of Residence:: Street of mailing address::

City of mailing address::

State or Province of Residence::

MD . 20850

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Applicant Authority type::

Primary Citizenship Country:

Status::

Given Name::

Middle Name: ... Family Name::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of mailing address::

City of mailing address::

State or Province

of mailing address: Postal or Zip Code

of mailing address:

Correspondence Information

Correspondence

Customer Number::

Phone number:: Fax number::

E-mail address::

Representative Information

Representative,

Customer Number::

Domestic Priority Information

This Application Continuation of

Inventor

US

Full Capacity

Ellen

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Application:: Continuity Type:: Parent Application:: Parent Filing Date:: 09/777,921 Feb. 07, 2001

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
-			

Assignee Information

Assignee name::

Street of mailing address::

City of mailing address::

State or Province

of mailing address::

Country of mailing address::

Postal or Zip Code

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